## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000335787

Entity Name: COASTAL CARDIOVASCULAR PLLC

**Current Principal Place of Business:** 

14 TIDEWATER DR

ORMOND BEACH, FL 32174

**Current Mailing Address:** 

14 TIDEWATER DR

ORMOND BEACH. FL 32174 US

FEI Number: 87-1865096 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CELIS, RENE DR. 14 TIDEWATER DR

ORMOND BEACH, FL 32174 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: RENE CELIS 03/13/2024

Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title AMBR

Name CELIS, RENE

Address 14 TIDEWATER DR

City-State-Zip: ORMOND BEACH FL 32174

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**OWNER** 

Electronic Signature of Signing Authorized Person(s) Detail

FILED Mar 13, 2024

**Secretary of State** 

4426522783CC

Date